

SEXUAL EDUCATION AND SEXUALLY TRANSMITTED INFECTIONS IN SCHOOL STUDENTS: AN INTEGRATIVE REVIEW

EDUCACIÓN SEXUAL E INFECCIONES DE TRANSMISIÓN SEXUAL EN ESTUDIANTES ESCOLARES: UNA REVISIÓN INTEGRATIVA

EDUCAÇÃO SEXUAL E AS INFECÇÕES SEXUALMENTE TRANSMISSÍVEIS EM ESCOLARES: UMA REVISÃO INTEGRATIVA

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Abstract

This study aims to analyze, in the scientific literature, students' knowledge about Sexually Transmitted Infections and present teaching strategies in sex education aimed at Sexually Transmitted Infections in Basic Education schools. Thus, this is an integrative literature review carried out in the PUBMED, SCIELO and LILACS databases from September to October 2021. The PRISMA flowchart was used for the selection of studies. The final scope consisted of 13 studies that were critically analyzed and stratified into two categories for data analysis: students' knowledge of Sexually Transmitted Infections; Interventions in sex education and their effectiveness for the knowledge of Sexually Transmitted Infections. Therefore, it is understood that the review identified that adolescent students had a deficit of knowledge about Sexually Transmitted Infections and that the interventions, despite having used several methodological approaches, they had similar aspects, as they contributed to the acquisition of knowledge by the target audience.

Keywords: Sexually Transmitted Infections; Health education; Sex Education; Students.

Resumen

Este estudio tiene como objetivo analizar, en la literatura científica, el conocimiento de los estudiantes sobre las Infecciones de Transmisión Sexual y presentar estrategias de enseñanza en educación sexual dirigida a las Infecciones de Transmisión Sexual en las escuelas de Educación Básica. Así, se trata de una revisión integrativa de la literatura realizada en las bases de datos PUBMED, SCIELO y LILACS de septiembre a octubre de 2021. Para la selección de los estudios se utilizó el diagrama de flujo PRISMA. El alcance final consistió en 13 estudios que fueron analizados críticamente y estratificados en dos categorías para el

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análisis de datos: conocimiento de los estudiantes sobre Infecciones de Transmisión Sexual; Intervenciones en educación sexual y su efectividad para el conocimiento de las Infecciones de Transmisión Sexual. Por lo tanto, se entiende que la revisión identificó que los estudiantes adolescentes tenían un déficit de conocimientos sobre las Infecciones de Transmisión Sexual y que las intervenciones, a pesar de haber utilizado varios enfoques metodológicos, tenían aspectos similares, ya que contribuyeron a la adquisición de conocimientos por parte del público objetivo.

Palabras clave: Infecciones de Transmisión Sexual; Educación para la salud; Educación sexual; Estudiantes.

Resumo

O presente estudo objetiva analisar, na literatura científica, o conhecimento dos estudantes sobre as Infecções Sexualmente Transmissíveis e apresentar estratégias de ensino em educação sexual voltadas às Infecções Sexualmente Transmissíveis em escolas da Educação Básica. Neste sentido, trata-se de uma revisão integrativa da literatura realizada nas bases de dados PUBMED, SCIELO e LILACS no período de setembro a outubro de 2021. Utilizou-se o fluxograma PRISMA para seleção dos estudos. O escopo final foi composto por 13 estudos que foram analisados criticamente e estratificados em duas categorias para análise dos dados: conhecimento dos escolares sobre Infecções Sexualmente Transmissíveis; Intervenções em educação sexual e sua eficácia para o conhecimento das Infecções Sexualmente Transmissíveis. Assim, entende-se que a revisão identificou que os estudantes adolescentes apresentaram um déficit de conhecimento sobre as Infecções Sexualmente Transmissíveis e, que as intervenções, apesar de terem utilizado várias abordagens metodológicas, tiveram aspectos similares, pois contribuíram para aquisição de conhecimentos do público em questão.

Palavras-chave: Infecções Sexualmente Transmissíveis; Educação em Saúde; Educação Sexual; Estudiantes.

Introduction

Sexually Transmitted Infections (STIs) are among the most common causes of diseases in the world and they can be considered a public health problem, with numerous health, social and economic consequences, in addition to serious consequences such as infertility, fetal loss, ectopic pregnancy, anogenital cancer and premature death (PINTO, et al., 2018; DOMINGUES et al., 2021), as well as infections in newborns and infants (SILVA; REIS; MEDEIROS, 2022).

Prevalence data from 2009 to 2016, the World Health Organization (WHO) estimated a total of 376.4 million incident cases of STIs considered curable: 127.2 million estimated cases of chlamydia, 86.9 million of gonorrhea, 156.0 million of trichomoniasis and 6.3 million of syphilis (DOMINGUES et al., 2021).

It should be noted that adolescents are among the groups most susceptible to risk behaviors for acquiring STIs, such as: early initiation of sexual activity, multiple partners, occasional use of condoms, consumption of alcoholic beverages and illicit drugs, especially associated with the occurrence of STIs (COSTA et al., 2012).

Adolescence is a dynamic transition phase between childhood and adulthood, established by the World Health Organization as the age range from 10 to 19 years old, and it involves a series of changes, both bodily and social (CORTEZ; SILVA, 2017). Therefore, it may represent a critical period for many individuals due to fast body growth, development of sexual characteristics, cognitive, social and emotional maturation (CORTEZ; SILVA, 2017).

Data from the Notifiable Diseases Information System (SINAN) (BRASIL, 2017) from the year 2017 point to the registration of 40,198 new cases of hepatitis and 119,800 cases of syphilis. In 2018 (BRASIL, 2018), 35.1% of syphilis notifications were in young adults; most affected age group. Still according to SINAN data, from 2007 to June 2019, Brazil recorded 300,496 cases of HIV infection, of which 746 (0.2%) were in the age group between 10 and 14 years old and 17,169 (5.7%) between 15 and 19 years (FERRO et al., 2021).

These epidemiological frameworks make explicit the demand for teaching, education and communication strategies to prevent illness and promote sexual health among adolescents, as access to consistent information, treated pedagogically, will increase the possibility of developing a safer sex life (QUEIROZ; ALMEIDA, 2018).

Such information points to the need for strategies that can help adolescents to stay informed and understood about sex education with an emphasis on STIs, so that they can help with their development and safety and realize that sex life begins with care and consistent information (QUEIROZ; ALMEIDA, 2018).

Therefore, because it is a place where adolescents spend an important part of their time, the school becomes a privileged space in the field of educational promotion for health (REIS et al., 2022; MUSSI et al., 2019; MUSSI et al., 2016), which

can be used by faculty in partnership with health professionals, in the construction of strategies that help expand knowledge related to health (BOMFIM; FORTUNATO; BAHIA, 2023) and recognition in maintaining sexual health (VIEIRA et al. 2021).

Thus, the objective of this work is to analyze, in the scientific literature, students' knowledge about Sexually Transmitted Infections and to present teaching strategies in sex education focused on Sexually Transmitted Infections in Basic Education schools.

Methods

This investigation presents the qualitative approach (MUSSI et al., 2019) and it is an integrative review (GANONG, 1987).

For the construction of the research question, the guidelines and recommendations of PICO were used, it's an acronym for P (Patient), I (intervention), C (comparison) and O (outcomes/outcome) (SANTOS; PIMENTA; NOBRE, 2007). P- Basic education students; I- Literature review; C- Not applicable; O- Interventions carried out about Sexual Education in Sexually Transmitted Infections and students' knowledge. The following research question arose: According to the scientific literature, what is the students' knowledge about STIs and teaching actions regarding sex education related to the prevention of STIs in students?

Moving on to identify the descriptors capable of enabling the tracking of sources, the theme/question was included in academic google and the first 30 results were consulted and the most recurrent occurrences of descriptors, accepted for verification of pertinence in the Descriptors in Health Sciences (DECS, 2021). Those present and their similar ones were accepted for the composition of the search routine, distributed in two axes, one related to Sexually Transmitted Infections and the other centered on Sex Education, considering their representations in Portuguese, English and Spanish languages.

With the incorporation of the Boolean operators OR, for interaction between similar ones, and AND, to verify the association between the axes, the routine was as it follows: Doenças Sexualmente Transmissíveis OR Enfermedades Sexualmente

Transmisibles OR Sexually Transmitted Illnesses OR Infecções Sexualmente Transmissíveis OR Enfermedades de Transmisión Sexual AND Educação em Saúde OR Educación en Salud OR Health Education AND Educação Sexual OR Sex Education OR Educación Sexual.

So, we started to search for studies, from September to October 2021, based on three electronic databases: National Library of Medicine, National Institutes of Health (PubMed), Scientific Electronic Library Online (SciELO), Latin-American and Caribbean Literature in Health Sciences (LILACS).

To guarantee broad coverage, no time frame was established. The following inclusion criteria were adopted: studies with primary data that addressed the proposed topic and made reference to the research question were fully available and freely accessible in virtual databases. The productions that presented duplicity were excluded, therefore, being considered only once.

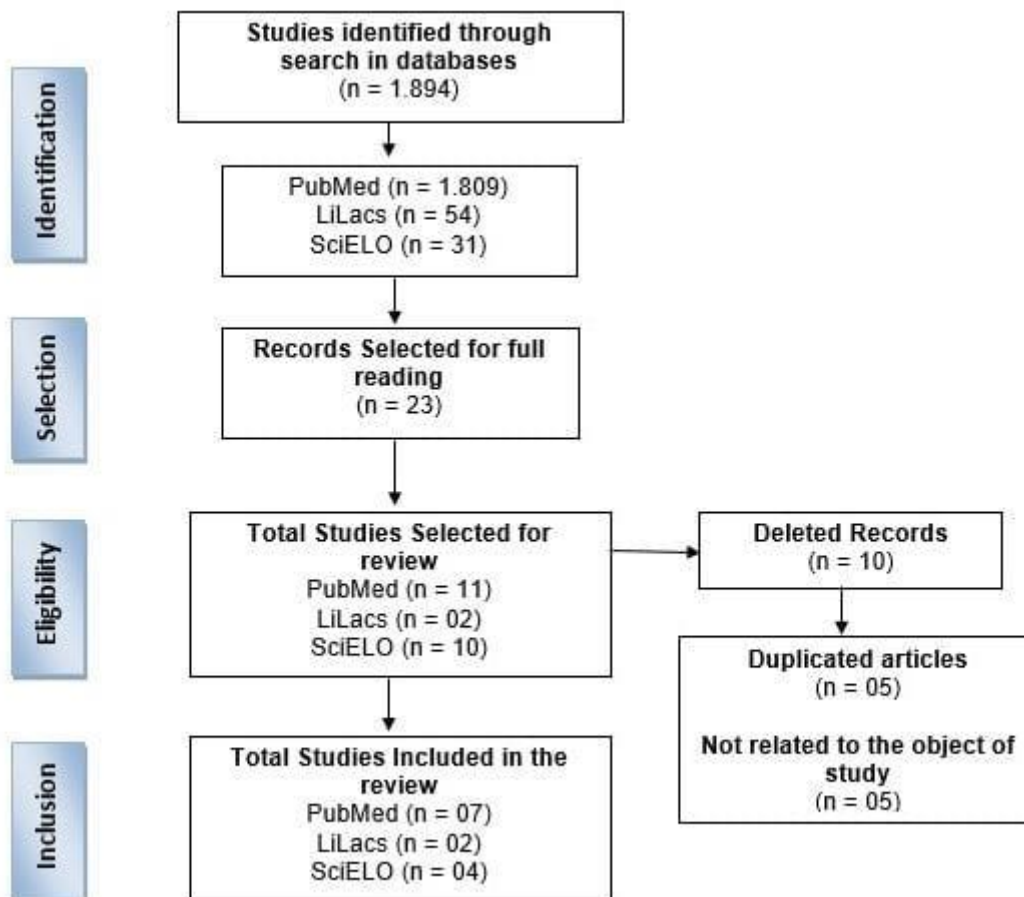
In the source selection stage, the title-abstract reading was performed to determine those publications that would go through the reading of the full text. To assess the level of scientific evidence, the classification proposed by Melnyk and Fineout-Overholt (2005) was adopted.

Results

The search resulted in a total of 1,894 publications, distributed as it follows: 95.5% in Pubmed, 2.8% in Lilacs and 1.7% in Scielo. After careful reading of the titles and summary of all texts, 1871 were excluded for not presenting accordance with the question of this review. From 23 forwarded for full reading, five did not deal with the topic of interest and five were duplicated and were excluded. Thus, 13 productions remained that met the methodological assumptions outlined for this study.

To present the studies included in this review, the flowchart proposed by PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analysis) was used, according to Picture 01.

Picture 01. Flowchart of the integrative review – Students' knowledge about Sexually Transmitted Infections (STIs) and interventions in sex education and their effectiveness for the knowledge about STIs.



Source: own elaboration.

To identify the analysis information of the final sample, two synthetic tables were used: authorship, year of publication, journal, country, study design, relevant findings and level of scientific evidence. Two categories of discussion were proposed, as indicated in the charts 01 and 02.

Chart 01 contains the publications in category one: Students' knowledge of Sexually Transmitted Infections. Table 02 contains the publications included for category two: Interventions in sex education and their effectiveness for the knowledge of Sexually Transmitted Infections.

Chart 01. Characterization of the studies included in the integrative review category 01 – Students' knowledge of Sexually Transmitted Infections

Country, Year / Author / Journal	Outline	Pertinent Findings	Scientific Evidence
- Brazil, 2017 - ALMEIDA, et al. - Revista Brasileira de Enfermagem	- Collected in 2015 - 22 teenagers 16-19 years old - Collected by individual interview - Descriptive qualitative	The participants were unable to recognize the symptoms that STIs cause and the ways in which AIDS is transmitted.	Level VI
- Italy, 2016 - DRAGO, et al. - Revista Internacional de pesquisa ambiental e saúde pública	- Collected between April 2013 and June 2014 - 2,867 teenagers, average age 17 years - Collection by individual questionnaire - Descriptive quantitative	Start of sexual life around 15 years old; some of the students: have used drugs; they did not know some STIs; some believed that only homosexuals and prostitutes could transmit STIs and They would not share spaces with people with HIV; only 0.5% of the adolescents recognized the STIs; confused about the meaning of contraception and prevention; only 22% knew that condoms and abstinence are the only methods of preventing STIs.	Level VI
- India, 2008 - MCMANUS, DHAR - BMC women's health	- Collected in 2007 - 251 students aged 14-19 years - Collected by individual questionnaire - Quantitative transversal	About 30% of interviewed people felt that HIV/AIDS could be cured, 41% were confused about whether the contraceptive pill could protect against HIV infection; they did not recognize some STI protection methods, they sought others to find out about STIs, they were ashamed to seek health services.	Level VI
- Morocco, 2019 - EL KAZDOUH, et al. - Reproductive Health	- Collected May-June 2016 - 56 teenagers 14-16 years - Collected by focus groups with recording - Observational Qualitative	The students had limited knowledge of the means of transmission, prevention methods for STIs and HIV; they looked for others to find out about STIs, they were ashamed to seek health services.	Level VI
- Brasil, 2007. - TORRES; BESERRA; BARROSO - Escola Anna Nery Revista de Enfermagem	Qualitative with focus group.	Students sought out others to find out about STIs, embarrassment to seek health services, girls more likely to submit to unprotected intercourse, adolescents reproduced the current condition of female submission to male desires.	Level VI

<ul style="list-style-type: none"> - Brazil, 2017 - GENZ, et al. - Texto & contexto enfermagem 	<ul style="list-style-type: none"> - 532 teenagers 10-19 years - Collected by individual questionnaire - Descriptive, observational, quantitative 	<p>Beginning of sexual life between 14 and 16 years. Some participants did not know how STIs are transmitted and believed that the contraceptive pill could prevent them.</p>	Level VI
<ul style="list-style-type: none"> - Brazil, 2013. - COSTA, et al. - Revista Gaúcha de Enfermagem 	<ul style="list-style-type: none"> - Collected in 2012 - 295 teenagers - Collected by individual questionnaire - Cross-sectional, quantitative study 	<p>Beginning of sexual life between 10 and 17 years old. Most of the participating teenagers presented coherent knowledge about sexual practices and risky behaviors, which make them vulnerable to STIs and HIV, presenting a positive aspect for the prevention of these infections.</p>	Level VI

Chart 02. Characterization of the studies included in the integrative review, category 02 two – Interventions in sex education and their effectiveness for the knowledge of Sexually Transmitted Infections.

Country, Year / Author / journal	Outline	Pertinent Findings	Scientific Evidence
<ul style="list-style-type: none"> - Czech Republic, 2021 - MACOUNOVÁ, et al. - International Journal of Environmental Research and Public Health 	<ul style="list-style-type: none"> - Collected in 2018-2019 - 1,210 teenagers 13-19 years - Collected by pre and post intervention questionnaire - lectures, interactive games - Descriptive quantitative 	<p>They used lectures, games, mannequins. Due to the observed increase in knowledge, especially among younger participants (13–14 years) it is recommended to direct other interventions at younger age groups.</p>	Level VI
<ul style="list-style-type: none"> - United States, 2015 - BORAWSKI, et al. - The journal of school health 	<ul style="list-style-type: none"> - Collected in 2000-2002 - 1,357 teenagers - randomized intervention 	<p>Pedagogical workshops and other materials were used and the groups reported significant improvements in knowledge about HIV/STD/condoms immediately after the intervention. However, those taught by school nurses reported significant and sustained changes (up to 12 months after the intervention).</p>	Level VI
<ul style="list-style-type: none"> - Spain, 2005. - PEREZ, et al. - Revista Española de Salud Pública 	<ul style="list-style-type: none"> - Application in 2003-2004 - 238 adolescents the average age was 15 - 59 years - Pre and post intervention questionnaire 	<p>Group workshops. After the intervention, there was an improvement in the level of knowledge related to contraceptive methods and HIV/AIDS transmission.</p>	Level VI

<ul style="list-style-type: none"> - Peru, 2005 - VELASQUEZ - Anais da Faculdade de Medicina 	<ul style="list-style-type: none"> - Application in 2005 - Use of interactive multimedia resource - 454 teenagers 14-17 years old - Application of pre and post intervention individual questionnaire 	<p>Beginning of sexual life between 13 and 15 years old, seeking others to find out about STIs, ashamed of seeking health services. An interactive multimedia CD was used to address STIs.</p> <p>A useful strategy in learning about STI and HIV/AIDS prevention. The results of this study showed that the educational resource improved the knowledge of adolescents about the subject.</p>	Level VI
<ul style="list-style-type: none"> - Ecuador, 2001. - BARROS <i>et al.</i> - Revista Panamericana de Salud Pública 	<ul style="list-style-type: none"> - Application in 1997-1998 - 358 Adolescents 12-15 years old in the intervention group - Studies before and after an educational intervention - Descriptive Transversal 	<p>Beginning of sexual life between 13 and 14 years.</p> <p>Workshops with games, cards were used. There was an increase in knowledge about STI/AIDS in the intervention, although long-term behavior modification has not yet been evaluated.</p>	Level VI
<ul style="list-style-type: none"> - Nigeria, 2008. - ESERE - African Health Sciences 	<ul style="list-style-type: none"> - 24 teenagers 13-19 years old - Studies before and after an educational intervention 	<p>Small groups and games, role play for development of skills of choice, brochures the results reveal that there was a significant difference regarding sexual risk behaviors among adolescents who participated in the program.</p>	Level VI

Discussion

Category 1 - School Students' Knowledge about Sexually transmitted Infections

The findings of the present investigation point to the beginning of sexual activities varying between 10 and 17 years old (DRAGO *et al.*, 2016; COSTA *et al.*, 2013; GENZ *et al.*, 2017; VELÁSQUEZ *et al.*, 2005; BARROS, *et al.*, 2001). Thus, we are concerned about the indication that adolescents and young people start their sexual activity at an increasingly early age (FERREIRA, TORGAL, 2011; SOARES *et al.*, 2015; DOMINGUES *et al.*, 2014), in addition they do not always adopt condoms as a preventive method when they start their sexual activities.

This early start, most of the time, is not articulated with knowledge that subsidizes a preparation in sex education (SPINOLA, 2020), as well as information about the various infections that can be acquired sexually and how they can be prevented (SOARES et al., 2015).

Knowledge about STIs needs to be widespread to everyone, even people who have not yet started their sexual lives in the study by Almeida et al. (2017), some of the participants had not started sexual relations yet, they demonstrate not knowing possible symptoms caused by STIs, the ways of transmission of AIDS, which is the most well-known STI, however, they demonstrated insufficient information that characterizes the infection and the causative agent.

These data corroborate the study (DRAGO et al., 2016) in which it was detected that most participants did not recognize HIV infections, syphilis, hepatitis A, hepatitis B, hepatitis C, simple herpes infection, candidiasis and genital warts as sexually transmitted, or the consequences of genital herpes infections, syphilis (MCMANUS; DHAR, 2008). This leads to the false information that all STIs, including HIV/AIDS, are curable. (MCMANUS; DHAR, 2008), generating lack of concern and, consequently, lack of interest about the subject among groups of adolescents.

Regarding the means that can possibly transmit STIs, the research by Genz et al. (2017) demonstrated that some participants believed that these infections would be transmitted by hands contact, kisses, hugs and sharing objects. In addition, they understood that oral contraceptives could also be used as a preventive method for STIs (GENZ, et al., 2017; DRAGO et al., 2016); They were not sure whether the birth control pill would prevent from HIV infection (MCMANUS; DHAR 2008).

Limited knowledge about STIs perpetuates the idea that they are only transmitted through unprotected sexual intercourse and when performed with prostitutes or homosexuals (DRAGO et al., 2016), sexual intercourse before marriage (EL KAZDOUH et al., 2019) and also the lack of knowledge that condoms are a method that protects against these infections (EL KAZDOUH et al.; MCMANUS; DHAR, 2008). These issues justify the resistance to sharing spaces with HIV-positive people (DRAGO et al., 2016).

This social stigma that still permeates HIV-infected people demonstrates limited knowledge about the ways of transmission, as well as treatment, which raises, among infected people, an aversion to exposure. However, when people living with HIV admit their diagnosis due to individual, social and family factors, there is the possibility that they will be resilient and persistent in the face of prejudice (ARAÚJO, 2019).

Another point to be considered is the relationship between drug use and STIs, as pointed out by the study (DRAGO et al., 2016) in which participants reported that they had already used some type of drug such as marijuana, LSD, ecstasy and cocaine. People who use drugs may be the most resistant to the suggestion of sexual protection, as they create situations that make it difficult to adopt protective measures to reduce the incidence of STIs (LEIGH, 2002; RUZANY, 2003), considering that the use of these substances reduces the risk perception limit and, therefore, the requirement to adopt individual protection (RUZANY, 2003).

Before the countless means of communication, teenagers often end up looking for information in social circles, such as friends, the internet and television, as a result of being ashamed of possible judgments, so they do not seek health services for relevant guidance about healthy conduct in intercourses (TORRES; BESERRA; TEIXEIRA, 2007; EL KAZDOUH et al., 2019; VELÁSQUEZ et al., 2005; MCMANUS; DHAR, 2008; NELSON et al., 2016; ROSA et al., 2020).

It should be noted that these sources are not always properly prepared to adequately transmit information regarding the prevention of STIs, in other words, the school, in fact, is a relevant place to transmit them, since adolescents spend a considerable period of time in this environment (GENZ et al., 2017; NELSON et al., 2016; MACHADO et al. 2021).

Another relevant aspect is that, often, themes related to sex education tend to be omitted in the family environment, mainly for women, in other words, a social repetition that places men as sexually vigorous and women as delicate, passive and sensible (TORRES; BESERRA; TEIXEIRA, 2007).

This also indicates that women are more likely to undergo sexual intercourse without negotiating the use of condoms in order to please their partner and not

cause distrust, a conduct that leads to vulnerability to STIs (TORRES; BESERRA; TEIXEIRA, 2007).

Category 2 - Interventions in Sex Education and their Effectiveness for the Knowledge of Sexually Transmitted Infections

In general, the studies used different types of interventions with adolescents based on their evaluation in the short and medium term, in relation to the acquisition of knowledge before and after the intervention. The professionals involved in the activities with the students were mostly teachers, but the study (BORAWSKI et al., 2015) used, in addition to teachers, school nurses.

The study carried out in the Czech Republic (MACOUNOVÁ et al., 2021) used pedagogical tools such as an educational lecture with content focused on HIV/AIDS and STIs and a game consisting of 8 tasks with many educational instruments (magnetic board, magnetic cards, samples of contraceptive methods, penis mannequins for condom handling training (MACOUNOVÁ et al., 2021). The strategy adopted showed that, regarding the concept of HIV, 48.7% of the students indicated correctly, this percentage increased to 84.7% after finishing the course, in addition, 80.0% understood that the condom is a relevant method for protection against HIV infection and, after the educational activity, 94.6%. When asked about the existence of a cure for HIV, before the activity 72.2% answered correctly and after the activity this percentage increased to 92.5% (MACOUNOVÁ et al., 2021).

It should be noted that the program proved to be more effective in participants aged 13 to 14 years and, because it was carried out on a one-off basis, there was no additional monitoring to assess the persistence of the results and the possible effects related to long-term risk behaviors (MACOUNOVÁ et al., 2021).

The educational model based on pedagogical workshops with four stages to address the sex education with a focus on STIs and HIV/AIDS, in which the activities had interactive materials such as worksheets, didactic games and other support materials, provided an increase in knowledge regarding ways of preventing STIs and

HIV/AIDS. A relevant data in this study is that, even after 8 months of the intervention, many of the participants indicated that they would not share the same space in the room with another student, if he was HIV positive (BARROS, et al., 2001).

In the study by Velásquez et al. (2005) carried out in Peru, the pedagogical strategy in interactive multimedia (CD) informs and educates in a playful way through six stories in videos approaching Sexually Transmitted Infections and the HIV/AIDS virus, confirming with regard to which teenagers are exposed. The impact of the actions was evaluated using questionnaires before and one month after the activities. Before the educational CD, 30% of the interviewed people recognized an STI and after using the CD this percentage increased to 49%, in other words, 3.5 times more likely to recognize an STI in their partners (VELÁSQUEZ et al., 2005). The significant increase in recognizing the STIs: gonorrhoea increased 26%, syphilis increased 24%, chlamydia increased 22%, genital herpes 21% more and chancroid increased 13%. Adolescents who knew HIV increased 15% and AIDS increased 17% (VELÁSQUEZ et al., 2005).

Given these data, a change in knowledge regarding sexually transmitted infections and HIV/AIDS was noticed, because it was an interactive way of working with a topic that is permeated with taboos.

In the study carried out in Spain by Pérez et al. (2005), the intervention was based on the organization of health workshops, in which the students elaborated advertising messages and were accompanied by school teachers. Before the intervention, 24.03% of the participants had or had had a sexual relationship with penetration, of these students, 98.24% said they had used a condom (PÉREZ et al., 2005), 95.72% of the study participants knew that the use of condoms during sexual intercourse protected against HIV infection and STIs. A relevant data found in the study is that only 71% of the participants stated that they would share a class with a patient with AIDS (PÉREZ et al., 2005).

After 6 months of the intervention activity, there was an improvement in knowledge of the preventive capacity of condoms against HIV/AIDS and STIs from 95.76% to 99.49%, and the correct use of the method increased from 62.13% to 73.46%. Those who would share the classroom with a student with AIDS increased to 77.6% (PÉREZ et al., 2005).

According to the authors, the strategy could have a greater impact if used in adolescents at an earlier age, when they haven't had sexual contact yet. Another relevant factor is that, even after the intervention, the resistance to sharing the classroom with another student with AIDS prevailed, which indicates that the issue related to prejudice against people infected with HIV needs to be, more and better, raised and debated.

The study (BORAWSKI et al., 2015) analyzed the impacts of syllabus focused on issues of knowledge and prevention of sexually transmitted infections, consisting of 06 stages, consisting of a series of teaching possibilities, such as group discussions, stories portrayed in videos, interactive exercises, dramatizations and involved health education teachers and school nurses. They were applied to students after immediate post-tests, four months and twelve months.

The data showed that education and health teachers had more skills in spreading knowledge, however, nurses were considered more skilled in transmitting information regarding the reduction of sexual risk behaviors, self-efficacy and beliefs related to condoms (BORAWSKI et al., 2015). The authors point out that this is due to the fact that nurses have considerable experience in talking to people about topics that can cause some embarrassment (BORAWSKI et al., 2015).

The strategies reported in a Systematic Review of the health education literature were used in the study by Esere (2008), which involved the participation of the group submitted to the intervention with dramatizations and groups work, it demonstrated significant results in relation to risk behaviors, such as the multiplicity of sexual partners.

Conclusion

The results of this integrative review showed, in general, that adolescent students have a lack of knowledge regarding Sexually Transmitted Infections, as discussed in category one. This indicates the need for the means to which they seek

information about the subject to be based on scientific knowledge, in other words, the school is one of the most appropriate places for this dissemination.

In the category two, it was observed that the interventions, despite having used many methodological approaches and carried out in different countries with different habits and populations, had similar aspects, because they contributed to the acquisition of knowledge even though, mostly, they were punctual.

Therefore, spaces for debates involving the theme of this research, which are essential in the formative path of students, must be offered continuously. In addition, from this multiple and diverse space, interactions with health professionals arise, also contributing to the construction of knowledge and the expansion of critical thinking.

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